

Fill in this information to identify the case:

Debtor name Heritage Disposal And Storage, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA, LINCOLN DIVISION

Case number (if known) 4:19-bk-40297

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property*(Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property*(Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases*(Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☒ Amended Schedule A/B; E/F; G
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 16, 2019

X /s/ Mark A. Vess

Signature of individual signing on behalf of debtor

Mark A. Vess

Printed name

Managing Member

Position or relationship to debtor

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Debtor name **Heritage Disposal And Storage, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA, LINCOLN DIVISION**

Case number (if known) **4:19-bk-40297**

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Checking Account with: Five Points Bank**

\$0.00

3.2. **Checking Account with: US Bank**

\$0.00

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

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13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials Recycled energetic materials and explosives : The materials need an outsource and final specification for processing. Currently there are approximately 685,000 pounds of materials. The liability should they need to be destroyed versus future processing would be about 5 to 7 dollars per pound. That is a disposal liability of about 3.5 to 5M.		\$0.00		\$0.00
20.	Work in progress Work in Progress		\$1,157,706.99		\$1,157,706.99
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				
23.	Total of Part 5. Add lines 19 through 22. Copy the total to line 84.				\$1,157,706.99
24.	Is any of the property listed in Part 5 perishable? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
25.	Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current Value _____				
26.	Has any of the property listed in Part 5 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

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- ☐ No. Go to Part 7.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops-either planted or harvested			
29. Farm animals <i>Examples: Livestock, poultry, farm-raised fish</i>			
30. Farm machinery and equipment <i>(Other than titled motor vehicles)</i> Farm Equipment	\$234,979.00		\$234,979.00
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6. Add lines 28 through 32. Copy the total to line 85.			\$234,979.00
34. Is the debtor a member of an agricultural cooperative? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative? <input type="checkbox"/> No <input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current Value _____			
36. Is a depreciation schedule available for any of the property listed in Part 6? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
37. Has any of the property listed in Part 6 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Office Furniture	\$67,386.00		\$67,386.00
40. Office fixtures Office Fixtures	\$33,414.00		\$33,414.00
41. Office equipment, including all computer equipment and communication systems equipment and software			

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Office Equipment **\$40,660.00** **\$40,660.00**

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** **\$141,460.00**
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2005 Chevrolet Silverado Vehicles	\$3,004.00		\$3,004.00
47.2. 2005 Chevrolet Silverado	\$4,147.00		\$4,147.00
47.3. 2005 Chevrolet Silverado	\$3,004.00		\$3,004.00
47.4. 2005 Chevrolet Silverado	\$3,004.00		\$3,004.00
47.5. 2003 Chevrolet C45	\$8,000.00		\$8,000.00

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

Machinery and Equipment **\$4,276,029.00** **\$4,276,029.00**

51. **Total of Part 8.** **\$4,297,188.00**
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

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- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Harrison TWP PT E 1/2 NE 1/4 24-11-11 1.55 acres		\$12,000.00		\$12,000.00
55.2. Harrison TWP PT E 1/2 E 1/2 NE 1/4 24-11-11 PT Tract 47A 10.28 acres		\$169,891.01		\$169,891.01
55.3. Center TWP PT NE 1/4 & PT W 1/2 NE 1/4 19-11-10 PT Tract 47A 148.68 acres		\$1,250,000.00		\$1,250,000.00
55.4. Center TWP PT N 1/2 NE 1/4 & PT N 1/2 NE 1/4 NE 1/4 30-11-10 PT Tract 48D 19.08 acres		\$40,000.00		\$40,000.00
55.5. Harrison TWP PT E 1/2 NE 1/4 & NW 1/4 NE 1/4 & PT SW 1/4 & PT E 1/2 NW 1/4 24-11-11 Tract 46 137.49 acres		\$2,700,000.00		\$2,700,000.00

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55.6.	Harrison TWP PT S 1/2 NE 1/4 & PT SE 1/4 NW 1/4 & PT NE 1/4 SW 1/4 & PT N 1/2 SE 1/4 24-11-11 Tract 48A 130.48 acres		\$1,250,000.00		\$1,250,000.00
55.7.	Harrison TWP PT S 1/2 N 1/2 SE 1/4 & PT E 1/2 SE 1/4 & S 1/2 SE 1/4 24-11-11 Tract 48C 139.61 acres		\$1,250,000.00		\$1,250,000.00
55.8.	Harrison TWP PT N 1/2 NE 1/4 NW 1/4 & PT N 1/2 N 1/2 NE 1/4 25-11-11 PT Tract 48C 24.09 acres		\$40,000.00		\$40,000.00
55.9.	Center TWP PT SW 1/4 NE 1/4 & PT S 1/2 NW 1/4 & PT N 1/2 SW 1/4 & PT NW 1/4 SW 1/4 19-11-10 Tract 48B 110.81 acres		\$800,000.00		\$800,000.00
55.10	Center TWP PT S 1/2 N 1/2 SW 1/4 & S 1/2 SW 1/4 & PT W 1/2 SE 1/4 19-11-10 Tract 48D 126.34 acres		\$800,000.00		\$800,000.00
55.11	Harrison TWP PT NW 1/4 NW 1/4 24-11-11 Tract 45A 6.86 acres		\$32,000.00		\$32,000.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$8,343,891.01

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

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- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$1,157,706.99</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$234,979.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$141,460.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$4,297,188.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$8,343,891.01</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+ \$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$5,831,333.99</u>	+ 91b. <u>\$8,343,891.01</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$14,175,225.00</u>

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United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA, LINCOLN DIVISION**

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Alfred Mrkvicka 342 N 110th Rd # M Wood River, NE 68883-9754 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,933.26 \$0.00
2.2	Priority creditor's name and mailing address Chris M. Kolb 2529 Mill River Rd Grand Island, NE 68801-7372 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,308.13 \$0.00

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2.3	Priority creditor's name and mailing address Cody Paro 407 Ponderosa Dr Grand Island, NE 68803-9653	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$907.34	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Daniel Astrones 2912 Goldenrod Dr Grand Island, NE 68801-8757	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$83,602.89	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address James E. Pederson 4252 Arizona Ave Grand Island, NE 68803-1005	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$20,112.96	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address James E. Rogers, Jr. 2939 Goldenrod Dr Grand Island, NE 68801-8756	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$82,063.03	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.7	Priority creditor's name and mailing address James H. Pedersen, Jr. 2639 Jan St Grand Island, NE 68803-1138	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$1,038.80</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$0.00</div>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.8	Priority creditor's name and mailing address James L. Milby PO Box 400 Cairo, NE 68824-0400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$29,336.50</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$0.00</div>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.9	Priority creditor's name and mailing address Jason A. Probasco, II 3120 W 17th St Grand Island, NE 68803-2411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$1,457.99</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$0.00</div>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.10	Priority creditor's name and mailing address Jeffery D. Pelowski 901 Ridge Road Pl Hickman, NE 68372-1418	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$25,891.64</div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 0;">\$0.00</div>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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2.11	Priority creditor's name and mailing address Jeffrey Roby 4060 Northview Dr Grand Island, NE 68803-3832	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,328.09	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Jeremiah A. Vess 2812 Lamar Ave Grand Island, NE 68803-6110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$19,132.88	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Jeromy McCoy 1919 N St Aurora, NE 68818-1730	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$464.08	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Justin C. Davis 4087 W Capital Ave Grand Island, NE 68803-1117	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,582.96	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.15	Priority creditor's name and mailing address Mark A. Vess 106 E 3rd St Alda, NE 68810-9660	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$271,893.75 \$0.00
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.16	Priority creditor's name and mailing address Steven Kolb 1901 W Anna St Grand Island, NE 68803-5930	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$35,563.68 \$0.00
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
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3.1	Nonpriority creditor's name and mailing address American Express PO Box 297879 Fort Lauderdale, FL 33329-7879 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,620.75
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3.2	Nonpriority creditor's name and mailing address Benchmark Capital Group 5100 Westheimer Rd Ste 200 Houston, TX 77056-5597 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,000.00
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3.3	Nonpriority creditor's name and mailing address Breakout Capital 6862 Elm St Fl 3 McLean, VA 22101-3897 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75,000.00
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3.4	<p>Nonpriority creditor's name and mailing address Culligan of Grand Island</p> <p>3112 W Old Potash Hwy Grand Island, NE 68803-5215</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$697.57
3.5	<p>Nonpriority creditor's name and mailing address Dave Huston</p> <p>108 N Locust St Grand Island, NE 68801-6004</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$187,790.79
3.6	<p>Nonpriority creditor's name and mailing address Donald Erickson</p> <p>3911 Warbler Rd Grand Island, NE 68803-3908</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$122,771.78
3.7	<p>Nonpriority creditor's name and mailing address ECCI Corporation</p> <p>13000 Cantrell Rd Little Rock, AR 72223-1637</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$12,478.71
3.8	<p>Nonpriority creditor's name and mailing address Ellerbrock Norris Insurance</p> <p>PO Box 816 Hastings, NE 68902-0816</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$88,000.00
3.9	<p>Nonpriority creditor's name and mailing address Fairbanks Irrigation</p> <p>15832 W Wood River Rd Wood River, NE 68883-9605</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$8,000.00
3.10	<p>Nonpriority creditor's name and mailing address Frederick Grimm</p> <p>2801 Alaskan Way Ste 107 Seattle, WA 98121-1135</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,186,343.30

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3.11	Nonpriority creditor's name and mailing address Grimm Family Ventures Brandon R Tomjack, Attorney 1700 Farnam St Ste 1500 Omaha, NE 68102-2078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	unknown
3.12	Nonpriority creditor's name and mailing address Grimm Family Ventures, LLC C/O Jaclyn Klintoe 12910 Pierce St Ste 20 Omaha, NE 68144-1105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$669,000.00
3.13	Nonpriority creditor's name and mailing address Hank Morast 4336 W Capital Ave Grand Island, NE 68803-1413 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,007.68
3.14	Nonpriority creditor's name and mailing address Huston & Higgins 108 N Locust St Grand Island, NE 68801-6004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,400.00
3.15	Nonpriority creditor's name and mailing address John Havener 6220 E Sandra Ter Scottsdale, AZ 85254-1367 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,000.00
3.16	Nonpriority creditor's name and mailing address JP Whitney & Associates, LLC 2028 E Ben White Blvd # 240-1941 Austin, TX 78741-6966 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110,180.00
3.17	Nonpriority creditor's name and mailing address Mark Vess 106 E 3rd St Alda, NE 68810-9660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,437,689.77

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3.18	Nonpriority creditor's name and mailing address Michael R. Sullivan 609 W 42nd St Kearney, NE 68845-2384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00
3.19	Nonpriority creditor's name and mailing address Mid Nebraska Disposal, Inc. PO Box 1089 Grand Island, NE 68802-1089 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$458.76
3.20	Nonpriority creditor's name and mailing address Olsson 201 E 2nd St Grand Island, NE 68801-5903 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,500.00
3.21	Nonpriority creditor's name and mailing address Parametrix, Inc. 60 Washington Ave Ste 390 Bremerton, WA 98337-5652 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110,523.21
3.22	Nonpriority creditor's name and mailing address Porbeck Engineering Corporation 106 S State St Little Rock, AR 72201-2122 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,582.25
3.23	Nonpriority creditor's name and mailing address Rambol 19020 33rd Ave W Ste 310 Lynnwood, WA 98036-4754 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,668.00
3.24	Nonpriority creditor's name and mailing address Romeo Engineering 4217 Hahn Blvd Fort Worth, TX 76117-1712 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,000.00

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3.25	Nonpriority creditor's name and mailing address Sapp Bros. PO Box 927 Grand Island, NE 68802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,082.74
3.26	Nonpriority creditor's name and mailing address Southern Power District PO Box 1687 Grand Island, NE 68802-1687 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,872.06
3.27	Nonpriority creditor's name and mailing address T Shirt Engineers 311 W 4th St Grand Island, NE 68801-4501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$249.16
3.28	Nonpriority creditor's name and mailing address TC West Campus 7th, LLC C/O Jaclyn Klinto 12910 Pierce St Ste 20 Omaha, NE 68144-1105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,820.00
3.29	Nonpriority creditor's name and mailing address The Meyer Five, LLP 3911 Warbler Rd Grand Island, NE 68803-3908 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$296,410.51
3.30	Nonpriority creditor's name and mailing address Tom Rogan 410 N Walnut St Grand Island, NE 68801-4516 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,412.88
3.31	Nonpriority creditor's name and mailing address Travelers-RMD PO Box 5600 Hartford, CT 06102-5600 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,558.00

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3.32 Nonpriority creditor's name and mailing address
Verizon Wireless

PO Box 25505
Lehigh Valley, PA 18002-5505

Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.*

\$739.27

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: ____

Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the
related creditor (if any) listed?

Last 4 digits of
account number, if
any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts

5a. \$ **619,617.98**

5b. + \$ **4,636,857.19**

5c. \$ **5,256,475.17**

Fill in this information to identify the case:

Debtor name **Heritage Disposal And Storage, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA, LINCOLN DIVISION**

Case number (if known) **4:19-bk-40297**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Land Lease from
January
2019-December 2019
This Lease will be
reviewed and renewed
on a yearly basis.
Lease Per Acre:
Irrigated Farmable
180 @ \$ 255 = \$ 45,900
Non Irrigated Farmable
350 @ \$129 = \$ 45,150**

**\$91,050
1st Half payment
\$45,525 due: March
15, 2019
2nd Half payment
\$45,525 due:
November 1,2019**

State the term remaining

List the contract number of any government contract

Adam Woitaszewski

2.2. State what the contract or lease is for and the nature of the debtor's interest

**\$6.6M Contract with
Dept. of Defense/Army
Contracting Command
for the demilitarization
and disposal of
Hexachloroethane (HC)
smoke canisters and
smoke pots.**

State the term remaining

List the contract number of any government contract

W52P1J-15-C-0088

**Army Contracting Command-RI
Bridget L. Kramer Bldgs
60 & 62
Rock Island, IL 61201-8000**

2.3. State what the contract or lease is for and the nature of the debtor's interest

**Adminstration for DOD
contract**

**DCMA Twin Cities
5600 American Blvd W Ste 600
Bloomington, MN 55437-1448**

Debtor 1 **Heritage Disposal And Storage, LLC**

First Name

Middle Name

Last Name

Case number (if known)

4:19-bk-40297**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

2.4. State what the contract or lease is for and the nature of the debtor's interest

Land Lease from
January
2019-December 2019
Acres:
Irrigated Farmable
None
Non-irrigated
Farmable
None
Hay / Grass
240 Approximate Acres

Lease Per Acre:
Hay / Grass 240 @
\$40.00 per acre =
\$9,600
1st Half payment
\$4,800 due: March
15, 2019
2nd Half payment
\$4,800 due: November
1,2019
Or
Hay / Grass 60 / 40
shares
Choice to be made by
Simple Faith farms at
time of execution on 15
March 2019.

State the term remaining

List the contract number of any government contract _____

Simple Faith Farms